WATERS OF SEVENOAKS, THE 6263 NORTH GREEN BAY AVENUE

GLENDALE 53209 Ownershi p: Corporation Phone: (414) 351-0543 Operated from 1/1 To 12/31 Days of Operation: 366 Highest Level License: Skilled Operate in Conjunction with Hospital? No Operate in Conjunction with CBRF? No Number of Beds Set Up and Staffed (12/31/00): 94 Title 18 (Medicare) Certified? Yes Total Licensed Bed Capacity (12/31/00): 94 Average Daily Census: **59** Number of Residents on 12/31/00: **59**

Services Provided to Non-Residents		Age, Sex, and Primary Diagn	Length of Stay (12/31/00)	%			
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	72. 9
Supp. Home Care-Personal Care	No					1 - 4 Years	22. 0
Supp. Home Care-Household Services	No	Developmental Disabilities	0. 0	Under 65	3.4	More Than 4 Years	5. 1
Day Services	No	Mental Illness (Org./Psy)	25. 4	65 - 74	5. 1		
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	32. 2		100. 0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	49. 2	***************	******
Adult Day Health Care	No	Para-, Quadra-, Hemi plegic	0.0	95 & 0ver	10. 2	Full-Time Equivale	nt
ongregate Meals No Cancer		0.0			Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	10. 2		100.0	(12/31/00)	
Other Meals	No	Cardi ovascul ar	25. 4	65 & 0ver	96. 6		
Transportation	No	Cerebrovascul ar	20. 3			RNs	5. 6
Referral Service	No	Diabetes	6.8	Sex	%	LPNs	15. 1
Other Services	No	Respiratory	11. 9			Nursing Assistants	
Provi de Day Programmi ng for		Other Medical Conditions	0. 0	Male	20. 3	Aides & Orderlies	30. 2
Mentally Ill	No	İ		Female	79. 7		
Provi de Day Programmi ng for			100. 0				
Developmentally Disabled	No	İ			100. 0		
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Method of Reimbursement

		Medi	care		Medi c	ai d											
		(Ti tl	le 18) (Title 19)			19)	9) Other				Private Pay			Managed Care			Percent
			Per Die	em		Per Die	m		Per Die	em		Per Dien	n		Per Diem	Total	Of All
Level of Care	No.	%	Rate	No	. %	Rate	No.	%	Rate	No	%	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	\$0. 00	0	0. 0	\$0.00	0	0. 0	\$0. 00	0	0. 0	\$0. 00	0	0. 0	\$0.00	0	0.0%
Skilled Care	13	100. 0	\$316.06	12	100. 0	\$104.68	0	0.0	\$0.00	33	100. 0	\$181.00	1	100. 0	\$350.00	59	100.0%
Intermediate				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0. 0%
Limited Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Personal Care				0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Residential Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0. 0%
Dev. Di sabl ed				0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Traumatic Brain In	j. 0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Ventilator-Depende	nt 0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Total	13	100. 0		12	100. 0		0	0. 0		33	100.0		1	100. 0		59	100. 0%

WATERS OF SEVENOAKS, THE

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Admissions, Discharges, and		Percent Distribution	n of Residents'	Condi ti	ons, Servi ces,	and Activities as of 12/	31/00
Deaths During Reporting Period							
				9	6 Needing		Total
Percent Admissions from:		Activities of	%	Ass	sistance of	% Totally	Number of
Private Home/No Home Health	10. 1	Daily Living (ADL)	Independent	0ne	Or Two Staff	Dependent	Resi dents
Private Home/With Home Health	0.0	Bathi ng	33. 9		55. 9	10. 2	59
Other Nursing Homes	1.9	Dressi ng	42. 4		47. 5	10. 2	59
Acute Care Hospitals	84. 4	Transferring	42. 4		47. 5	10. 2	59
Psych. HospMR/DD Facilities	0.0	Toilet Use	42. 4		47. 5	10. 2	59
Rehabilitation Hospitals	0.0	Eating	79. 7		1. 7	18. 6	59
Other Locations	3. 5	*************	******	*****	******	*********	********
Total Number of Admissions	257	Continence		%	Special Treatm	ents	%
Percent Discharges To:		Indwelling Or Extern	nal Catheter	8. 5	Receiving Re	spi ratory Care	15. 3
Private Home/No Home Health	0.0	0cc/Freq. Incontiner	nt of Bladder	42. 4	Receiving Tr	acheostomy Care	0. 0
Private Home/With Home Health	52. 4	0cc/Freq. Incontiner	nt of Bowel	33. 9	Receiving Su	cti oni ng	0. 0
Other Nursing Homes	6. 0				Receiving Os	tomy Care	0. 0
Acute Care Hospitals	19. 4	Mobility			Receiving Tu	be Feeding	3. 4
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	0.0	Receiving Me	chanically Altered Diets	20. 3
Rehabilitation Hospitals	0.0						
Other Locations	6. 7	Skin Care			Other Resident	Characteri sti cs	
Deaths	15. 5	With Pressure Sores		11.9	Have Advance	Di recti ves	45. 8
Total Number of Discharges		With Rashes		0.0	Medi cati ons		
(Including Deaths)	252				Receiving Ps	ychoactive Drugs	39. 0
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	Ownershi p: Thi s Propri etary		Bed	Si ze:	Li co	ensure:			
			50-	99	Ski l	lled	Al l		
	Facility	acility Peer Group		Peer	Group	Peer	Group	Facilities	
	%	%	Ratio	%	Ratio	%	Rati o	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	62. 8	74. 6	0.84	86. 1	0. 73	81. 9	0.77	84. 5	0.74
Current Residents from In-County	89. 8	84. 4	1.06	90. 2	1.00	85. 6	1.05	77. 5	1. 16
Admissions from In-County, Still Residing	15. 2	20.4	0. 75	22. 1	0.69	23. 4	0.65	21.5	0.71
Admissions/Average Daily Census	435. 6	164. 5	2.65	168. 8	2. 58	138. 2	3. 15	124. 3	3.51
Discharges/Average Daily Census	427. 1	165. 9	2. 58	169. 2	2. 52	139.8	3. 05	126. 1	3. 39
Discharges To Private Residence/Average Daily Census	223. 7	62. 0	3.61	70. 9	3. 15	48. 1	4.65	49. 9	4. 49
Residents Receiving Skilled Care	100	89. 8	1. 11	93. 2	1. 07	89. 7	1. 11	83. 3	1. 20
Residents Aged 65 and Older	96. 6	87. 9	1. 10	93. 4	1. 03	92. 1	1.05	87. 7	1. 10
Title 19 (Medicaid) Funded Residents	20. 3	71.9	0. 28	51. 5	0.40	65. 5	0.31	69. 0	0. 29
Private Pay Funded Residents	55. 9	15.0	3. 72	36. 3	1.54	24. 5	2. 29	22.6	2.48
Developmentally Disabled Residents	0. 0	1. 3	0. 00	0.4	0.00	0. 9	0.00	7. 6	0.00
Mentally Ill Residents	25. 4	31.7	0. 80	33. 0	0.77	31. 5	0.81	33. 3	0.76
General Medical Service Residents	0. 0	19. 7	0.00	24. 2	0.00	21.6	0.00	18. 4	0.00
Impaired ADL (Mean)	32. 2	50. 9	0. 63	48. 8	0. 66	50. 5	0.64	49. 4	0.65
Psychological Problems	39. 0	52. 0	0. 75	47. 7	0. 82	49. 2	0.79	50. 1	0. 78
Nursing Care Required (Mean)	6. 4	7. 5	0.85	7. 3	0.87	7. 0	0. 90	7. 2	0.89